

OFFICE OF LEGISLATIVE RESEARCH
PUBLIC ACT SUMMARY



PA 18-170—sHB 5155

Public Health Committee

AN ACT CONCERNING THE TAX IMPOSED ON AMBULATORY SURGICAL CENTERS AND ANNUAL ADJUSTMENTS TO ASSESSMENT RATES ADOPTED FOR CERTAIN UNITS OF COMMON INTEREST COMMUNITIES AND CONDOMINIUMS UNDER COMMON OWNERSHIP

SUMMARY: Beginning July 1, 2019, this act (1) exempts from the gross receipts tax on ambulatory surgical centers (ASC) gross receipts from any Medicaid and Medicare payments the ASC receives and (2) specifies that the existing exemption for the first \$1 million of an ASC's gross receipts excludes Medicaid and Medicare payments.

The act also requires the Department of Social Services (DSS) commissioner, in consultation with the Connecticut Association of Ambulatory Surgical Centers, to establish a pilot program to study ways of increasing access to, and decreasing the cost of, medical care under the Medicaid program by having certain medical procedures performed at ASCs.

Lastly, the act modifies the property tax assessment law amended by PA 18-169, § 45, which requires Hartford to make certain annual adjustments to the assessment ratio for residential property. The act:

1. eliminates a provision prohibiting four or more common interest community or condominium units under common ownership from qualifying as residential property under the law;
2. makes a technical change by specifying that the common interest community and condominium properties that qualify as residential property include those converted from apartments before July 1, 2018, rather than before July 31, 2018; and
3. changes the effective date of PA 18-169, § 45, by applying it beginning with the 2018, rather than 2017, assessment year.

EFFECTIVE DATE: July 1, 2018, except the pilot program provision is effective upon passage and the property tax assessment provision is applicable to assessment years beginning on or after October 1, 2018.

ASC PILOT PROGRAM

Under the act, the ASC pilot program must (1) establish the application procedure; participation criteria; applicable medical procedures, and their appropriate reimbursement rates, and (2) require any administrative services organization handling Medicaid case management to refer Medicaid patients to

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such ASCs for medically appropriate treatment, as determined by the DSS commissioner. The act authorizes DSS and the Office of Policy and Management to establish state-funded rate enhancements, within available appropriations, for certain medical procedures performed at ASCs for Medicaid patients.

By December 31, 2019, the DSS commissioner must report on the pilot program, any resulting cost savings to the state, and his recommendations to the Finance, Revenue and Bonding; Human Services; and Public Health committees.